

Gloria Dei Lutheran School

Authorization to Apply:

Sunscreen Lotion Petroleum Jelly Insect Repellant Hand Soap

(Please circle the application that is applicable)

Child's Name: _____

Grade Level: _____ Age: _____

Teacher: _____

Product Name: _____

Application Time: _____

Children age 9 and over are allowed to apply their own sunscreen, lotion, petroleum jelly, or insect repellent. Products must be kept in the School Office.

Are there any adverse reactions to the application circled above?

(please list the reaction)

This authorization is effective for: School Year or Summer Program

(please circle only one)

A new form must be completed for each program.

The product to be applied must be provided by the parent. It should be clearly marked with the child's first and last name and then given to the school office for storage.

Signature of Parent or Guardian: _____

Printed Name and Date: _____

Signature of Gloria Dei Staff Member: _____